

SPECIAL EVENT PERMIT APPLICATION

Send all completed and properly signed forms (including attachments as necessary) along with applicable licensing fees (\$100) to: South Jordan City, Community Services, 1600 W. Towne Center Drive, South Jordan City, UT 84095
 Telephone: 254-3742 Ext. 1725 or Ext. 1737

***INCOMPLETE APPLICATIONS WILL BE RETURNED**

*** Please Allow 4-5 weeks for approval**

| Section 1: Event Information | | | |
|--|--------|----------------------------|--|
| Event Title: | | | |
| Event Location: | | Estimated # of Attendants: | |
| Start Date: | | End Date: | |
| Hours of Operation: From _____ a.m/p.m To _____ a.m/p.m | | | |
| Detailed Description of Event(s): | | | |
| Section 2: Primary Applicant Information | | | |
| Applicant: | | | |
| Address: | | Apt/Suite No. | |
| City: | State: | Zip Code: | |
| Telephone: | | Email: | |
| Section 3: Business Information | | | |
| Business Name: | | | |
| Business Address: | | | |
| Type of Organization: <input type="checkbox"/> Corporation; <input type="checkbox"/> Partnership; <input type="checkbox"/> Sole Proprietorship | | | |
| Sales Tax # (if applicable): | | Federal Tax ID #: | |
| Section 4: Contact Information for Day of Event | | | |
| Contact Name #1: | | | |
| Office Phone: | | | |
| Cell Phone: | | | |
| Contact Name #2: | | | |
| Office Phone: | | | |
| Cell Phone: | | | |

Section 5: Attachment Checklist

- Police and Fire Protection Plan
- Food and Water Facilities Plan
- SL Valley Health Department Certificate (if food will be served)
- Sanitation Facilities Plan
- Medical Facilities Plan (1st aid station, EMT, etc.)
- Vehicle Access and Parking Plan
- Facilities for Clean-up and disposal
- Lighting & Noise Control Plan
- Event Location Map (marathon's/5k's/walk's need a route map with start/finish lines clearly marked)
- Certificate of Liability Insurance – listing South Jordan City as “additional insured”
- Detailed Traffic Control Plan, including notification to adjacent property owners as deemed appropriate
- Reserved Park Pavilion Receipt
- Private Property - must include a signed and notarized affidavit
- AED on site for all public or commercial recreation and sporting fields, during sporting events at which more than one hundred fifty (150) people are in attendance at any given time.

Applicant affirms that he/she agrees to comply with all ordinances, codes and regulations set forth by South Jordan City, Salt Lake County, the State of Utah, and Federal Standards. The Applicant shall assume the risks involved in conducting the permitted activities, business or services and shall hold harmless and indemnify the city and its officers, employees, agents, assigns and sureties for any damage, injury, loss or expense, including attorney fees, to applicant or any third party as a result of applicant's permitted activities. Applicant further affirms that all statements contained in this application are true and correct.

IF THIS APPLICATION IS SIGNED IN BEHALF OF A CORPORATION, THE SIGNATURE ALSO CERTIFIES THAT HE/SHE IS AUTHORIZED TO ACT ON ITS BEHALF.

SIGNATURE _____ DATE _____

***OFFICIAL USE ONLY ***

| Department Review | Date Reviewed | Recommendation | Initials | Explanation if not recommended for approval |
|-------------------|---------------|--|----------|---|
| Parks | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Police | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Fire | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Public Works | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Streets | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Legal | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Recreation | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Risk Management | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |
| Code Compliance | | <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A | | |

Permit Number: _____ Issued: _____